

~~Best Available Copy~~

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

G O 35 - 001

CLAIMS AS FILED - PART I

| (Column 1) | (Column 2) |
|----------------------------------|--------------------------|
| TOTAL CLAIMS | 17 |
| FOR | NUMBER FILED |
| TOTAL CHARGEABLE CLAIMS | 17 minus 20 = |
| INDEPENDENT CLAIMS | 4 minus 3 = |
| MULTIPLE DEPENDENT CLAIM PRESENT | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

| RATE | FEES | RATE | FEES |
|-----------|--------|--------------|--------|
| BASIC FEE | 355.00 | OR BASIC FEE | 710.00 |
| X\$ 9= | | OR X\$18= | |
| X40= | 4.0 | OR X80= | |
| +135= | | OR +270= | |
| TOTAL | 395 | OR TOTAL | |

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MD05 CLAIMS AS AMENDED - PART II

| AMENDMENT | CLAIMS REMAINING AFTER AMENDMENT | (Column 2) | (Column 3) | |
|--|---|------------|---|------------------|
| | | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 17 | Minus | .. 20 | = |
| Independent | 4 | Minus | ... 4 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|------------------|------------------------|-----------|------------------------|
| X\$ 9= | | OR X\$18= | |
| X40= | | OR X80= | |
| +135= | | OR +270= | |
| TOTAL ADDIT. FEE | | OR TOTAL | |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | (Column 2) | (Column 3) | |
|--|---|------------|---|------------------|
| | | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | Minus | .. | = |
| Independent | | Minus | ... | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|------------------|------------------------|-----------|------------------------|
| X\$ 9= | | OR X\$18= | |
| X40= | | OR X80= | |
| +135= | | OR +270= | |
| TOTAL ADDIT. FEE | | OR TOTAL | |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | (Column 2) | (Column 3) | |
|--|---|------------|---|------------------|
| | | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | | Minus | .. | = |
| Independent | | Minus | ... 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|------------------|------------------------|-----------|------------------------|
| X\$ 9= | | OR X\$18= | |
| X40= | | OR X80= | |
| +135= | | OR +270= | |
| TOTAL ADDIT. FEE | | OR TOTAL | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.